U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

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## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is rnandatory under P.L. 86-257, as amended Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

F	or Official Use	Only
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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 1/052	2. Fiscal Year Covered From			
	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name Jorge Ramirez	Name UFCW Local No. 1546			
	Labor Organization File Number 542-277			
P.O. Box, Bldg., Room No., if any P.O. Box 803354	P.O. Box, Building and Room Number, if any			
Street	Street 1649 West Adams Street			
City Chicago	City Chicago			
State Illinois ZIP Code + 4 60680-3354	State Illinois ZIP Code + 4 60612			
5. Position in labor organization. Executive Director				

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including to monetary value from an employer whose employees you	pans) with, or derived income or other economic benefit of ur organization represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name ZENITH ADMINISTRATORS	MISC MEAL AND ENT
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any	
	7.b. Amount.
Street 541 NORTH FAIRBANKS CT, SUITE 2600	
City CHICAGO	\$118
State Illinois ZIP Code + 4 60	611

## Signature

submitted in this report (including the	undersigned declares, under penalty of information contained in any accompantue, correct, and complete. (See the se	ying docur	nents), has been exami	alties of the law, that all of the information ned by the signatory and is, to the best of the ons.)
Signed		On	8(11/05)	(312) 733-2999  Telephone Number

Name of Person Filing Jorge Ramirez	File Number U-				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
Name and address of Business (including trade name, if any).	9. Business deals with:				
Name Trade Name, if any:	a. Labor Organization b. Trust				
P.O. Box, Bldg , Room No., if any Street	c. Employer				
City State Illinois ZIP Code + 4					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any Street					
City	11.b. Approximate dollar value of such dealing.				
State Illinois ZIP Code + 4	12.a. Nature of interest hel	a of income received.			
	12.b. Amount.				
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State Illinois ZIP Code + 4		- Marine			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.				



United Food & Commercial Workers Intl. Union

Kenneth R. Boyd President

Terry Kramer Secretary-Treasurer

Jorge Ramirez Executive Director

August 12, 2005

U.S. Department of Labor ESA/OLMS, Room N-5616 200 Constitution Avenue, NW Washington, DC 20210-0001

Dear Sir or Madam:

Enclosed please find LM-30 reports covering the fiscal year of January 1, 2004 through December 31, 2004.

As I was not aware of the report requirement for filing Form LM-30, for the period of January 1, 2004 to December 31, 2004, and prior to that time, I have attempted in good faith to reconstruct such financial transactions or arrangements that may be determined to be reportable occurrences. As I do not have accurate records of such occurrences, some or several items may be unintentionally omitted from my filings. The enclosed and completed LM-30 reports represents my honest effort to reasonably estimate and report what I believed to be the necessary information.

Sincerely.

Jorge Ramirez

Enclosures

Main Office: (312) 733-2999 Fax: (312) 733-4369

Fax: (847) 593-3515 601 W. Golf Rd., Mt. Prospect IL 60056





United Food & Commercial Workers Intl. Union, AFL-CIO & CLC

Kenneth R. Boyd President

**Terry Kramer** Secretary-Treasurer Jorge Ramirez
Executive Director

August 12, 2005

U.S. Department of Labor ESA/OLMS, Room N-5616 200 Constitution Avenue, NW Washington, DC 20210-0001

Dear Sir or Madam:

Enclosed please find LM-30 reports covering the fiscal year of January 1, 2004 through December 31, 2004.

As I was not aware of the report requirement for filing Form LM-30, for the period of January 2, 2004 to December 31, 2004, and prior to that time, I have attempted in good faith to reconstruct such financial transactions or arrangements that may be determined to be reportable occurrences. As I do not have accurate records of such occurrences, some or several items may be unintentionally omitted from my filings. The enclosed and completed LM-30 reports represent my honest effort to reasonably estimate and report what I believed to be the necessary information.

Sincerely,

Javier Ramirez

**Enclosures** 

1649 W. Adams Street, Chicago IL 60612

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 Suburban Office: (847) 593-3500

 Fax: (312) 733-4369
 Fax: (847) 593-3515

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601 W. Golf Rd., Mt. Prospect IL 60056

UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

Sender: Please print your name, address, and ZIP+4 in this box
 UFCW LOCAL 1546
 ATTN: ACCOUNTING DEPT.
 1649 WEST ADAMS STREET
 CHICAGO ILLINOIS 60612

(LM 30 RECEIPT #3)